

10/538210

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
With Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

PHUS020521

First Named Inventor

J. DAVID SCHAFFER

COMPLETE IF KNOWN

Application Number

/

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR PREDICTING A NUMBER OF INDIVIDUALS
INTERESTED IN AN ITEM BASED ON RECOMMENDATIONS OF SUCH ITEM**

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.


Rec'd PET/PTO 09 JUN 2005
10/538210

PTO/SB/01 (03-01)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label		*24737* 		OR <input type="checkbox"/> Correspondence address below	
PATENT TRADEMARK OFFICE							
Name PHILIPS ELECTRONICS NORTH AMERICA CORPORATION							
Address P.O. BOX 3001							
City BRIARCLIFF MANOR			State NEW YORK		ZIP 10510		
Country USA			Telephone (914) 332-0222		Fax (914) 332-0615		
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.</p>							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) J. David				Family Name or Surname SCHAFER			
Inventor's Signature <i>J. David Schaffer</i>				Date 2003-12-5			
Wappingers Falls		New York		USA		USA	
Residence: City NY		State		Country		Citizenship	
101 Edgehill Road							
Mailing Address							
Wappingers Falls		New York		12590		USA	
City		State		Zip		Country	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any)) Yasser H.				Family Name or Surname ALSAFADI			
Inventor's Signature				Date			
Residence: City Yorktown Heights		New York		USA		USA	
City		State		Country		Citizenship	
2227 Mohansic Avenue							
Mailing Address							
Yorktown Heights		New York		Zip 10598		USA	
City		State		Zip		Country	
<input checked="" type="checkbox"/> Additional inventors are being named on the 1/1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

Please type a plus sign (+) inside this box → +

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>2</u>
--------------------	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Amr F.		YASSIN	
Inventor's Signature		Date	
Residence: City	Chesterfield	State	MO
		Country	USA
Mailing Address			
736 The Hamptons Lane			
Mailing Address			
City:	Chesterfield	State	Missouri
		ZIP	63017
		Country	
		USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	
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Inventor's Signature		Date	
Residence: City		State	
		Country	
Mailing Address			
Mailing Address			
City		State	
		Zip	
		Country	

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	PHUS020521
	First Named Inventor	J. DAVID SCHAFFER
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR PREDICTING A NUMBER OF INDIVIDUALS INTERESTED IN AN ITEM BASED ON RECOMMENDATIONS OF SUCH ITEM ✓

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.


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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		<div style="border: 1px solid black; border-radius: 50%; width: 60px; height: 60px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> <div style="font-size: 24px; font-weight: bold;">*24737*</div> </div> 		OR <input type="checkbox"/> Correspondence address below	
PATENT TRADEMARK OFFICE					
Name PHILIPS ELECTRONICS NORTH AMERICA CORPORATION					
Address P.O. BOX 3001					
City BRIARCLIFF MANOR		State NEW YORK		ZIP 10510	
Country USA		Telephone (914) 332-0222		Fax (914) 332-0615	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name J. David (first and middle [if any])		Family Name SCHAFER or Surname			
Inventor's Signature			Date		
Wappingers Falls Residence: City		New York State	USA Country	USA Citizenship	
101 Edgehill Road Mailing Address					
Wappingers Falls City		New York State	12590 Zip	USA Country	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Yasser H. (first and middle [if any])		Family Name ALSAFADI or Surname			
Inventor's Signature <i>[Signature]</i>			Date 12/5/2003		
Residence: City Yorktown Heights NY		New York State	USA Country	USA Citizenship <input checked="" type="checkbox"/>	
2227 Mohansic Avenue Mailing Address					
Yorktown Heights City		New York State	Zip 10598	USA Country	
<input checked="" type="checkbox"/> Additional Inventors are being named on the 1/1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

2-00

Please type a plus sign (+) inside this box → ☐

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

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Amr F.		YASSIN	
Inventor's Signature		Date	
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Country	USA	Citizen ship	Egypt
Mailing Address			
736 The Hamptons Lane			
Mailing Address			
City:	Chesterfield	State	Missouri
ZIP	63017	Country	USA
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Country		Citizen ship	
Mailing Address			
Mailing Address			
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Zip		Country	

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10/538210

PTO/SB-1 (03-01)

Approved for use through 10/31/2002, OMB No. 551-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	PHUS020521
	First Named Inventor	J. DAVID SCHAFER
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

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☒ is attached hereto

OR

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Country	Priority Not Claimed	Certified Copy Attached?	
					YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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PTO/SB/PT (03/01)

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		X Customer Number or Bar Code Label		*24737*		OR <input type="checkbox"/> Correspondence address below	
PATENT TRADEMARK OFFICE							
Name PHILIPS ELECTRONICS NORTH AMERICA CORPORATION							
Address P.O. BOX 3001							
City BRIARCLIFF MANOR			State NEW YORK		ZIP 10510		
Country USA			Telephone (914) 332-0222		Fax (914) 332-0615		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name J. David (first and middle [if any])				Family Name SCHAFER or Surname			
Inventor's Signature						Date	
Wappingers Falls Residence: City			New York State		USA Country		USA Citizenship
101 Edgehill Road Mailing Address							
Wappingers Falls City			New York State		12590 Zip		USA Country
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Yasser H. (first and middle [if any])				Family Name ALSAFADI or Surname			
Inventor's Signature						Date	
Residence: City Yorktown Heights			New York State		USA Country		USA Citizenship
2227 Mohansic Avenue Mailing Address							
Yorktown Heights City			New York State		Zip 10598		USA Country
<input checked="" type="checkbox"/> Additional Inventors are being named on the 1/1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

Please type a plus sign (+) inside this box → +

Approved for use through 10/31/2005 OMB 0651-0032

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
3-02 Amr E.		YASSIN	
Inventor's Signature x <i>[Signature]</i>		Date x 12/8/03	
Residence: City	Chesterfield	State	MO
Country	USA		Citizen ship
Egypt ✓			
Mailing Address 736 The Hamptons Lane			
Mailing Address			
City:	Chesterfield	State	Missouri
ZIP	63017		Country
USA			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizen ship
Mailing Address			
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
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Residence: City	State	Country	Citizen ship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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10/538210

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JC17 Rec'd PCT/PTO 09 JUN 2005
Atty. Docket

In re Application of

J. DAVID SCHAFER ET AL

US020521

Serial No.

Filed: CONCURRENTLY

Title: METHOD AND APPARATUS FOR PREDICTING A NUMBER OF INDIVIDUALS
INTERESTED IN AN ITEM BASED ON RECOMMENDATIONS OF SUCH ITEM
INFORMATION

Commissioner for Patents
Alexandria, VA 22313

APPOINTMENT OF ASSOCIATES

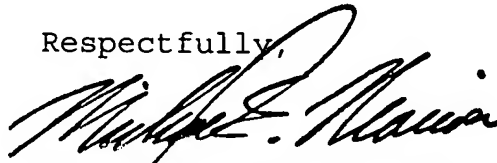
Sir:

The undersigned Attorney of Record hereby revokes all
prior appointments (if any) of Associate Attorney(s) or Agent(s) in
the above-captioned case and appoints:

/- GREGORY L. THORNE (Registration No. 39,398)
c/o U.S. PHILIPS CORPORATION, Intellectual Property & Standards,
345 Scarborough Road, P.O. Box 3001, Briarcliff Manor, New York
10510, his Associate Attorney(s)/Agent(s) with all the usual powers
to prosecute the above-identified application and any division or
continuation thereof, to make alterations and amendments therein,
and to transact all business in the Patent and Trademark Office
connected therewith.

ALL CORRESPONDENCE CONCERNING THIS APPLICATION AND THE
LETTERS PATENT WHEN GRANTED SHOULD BE ADDRESSED TO THE UNDERSIGNED
ATTORNEY OF RECORD.

Respectfully,



Michael E. Marion, Reg. 32,266
Attorney of Record

Dated at Briarcliff Manor, New York
this 7th day of June, 2005.

10/538210

PTO/SB/98-411-01

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with the Customer Number:

24737

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

☒ The address associated with Customer Number:

24737

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
City	State	Zip	
Country			
Telephone	Fax		

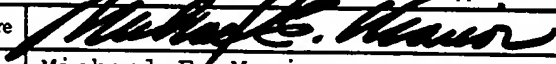
Assignee Name and Address:

KONINKLIJKE PHILIPS ELECTRONICS N.V.
 Groenewoudseweg 1
 5621 BA Eindhoven, The Netherlands

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/98 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	14 January 2005
Name	Michael E. Marion	Telephone	(914) 333-9637
Title	Authorized Representative		

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

STATEMENT UNDER 37 CFR 3.73(b)

1017 Rec'd PCT/PTO 09 JUN 2005-
10/538210

Applicant/Patent Owner: Koninklijke Philips Electronics N.V.

Application No./Patent No.: _____ Filed/Issue Date: Concurrently

Entitled: METHOD AND APPARATUS FOR PREDICTING A NUMBER OF INDIVIDUALS INTERESTED IN AN ITEM BASED ON RECOMMENDATIONS OF SUCH ITEM

Koninklijke Philips Electronics N.V., a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

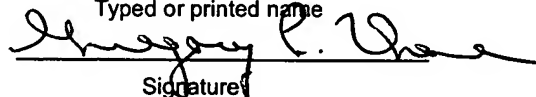
6/8/05

Date
(914) 333-9665

Telephone number

GREGORY L. THORNE, Reg. 39,398

Typed or printed name



Signature

Sr. Intellectual Property Counsel

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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